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SEP 0 2 2005

| To: | USPTO | Fromi | Claire Wygand for Cathy R. Moore | | | | |
|--------|---|--------|--|--|--|--|--|
| | Examiner H. C. Rickman | | Phone: (704) 365-4881 | | | | |
| | Art Unit 1773 | | Fax: (704) 365-4851 | | | | |
| Faxq | (571) 273-8300 | Pagesi | 20 pages total | | | | |
| | | | Transmittal facsimile cover sheet (1 page) | | | | |
| | | | Amendment (16 pages) | | | | |
| | | | 1-month extension of time (1 page) | | | | |
| | | | Fee transmittal (1 page) | | | | |
| | | | Credit card form (1 page) | | | | |
| Phone: | · | Date: | September 2, 2005 | | | | |
| Rei | Application No. 09/757,721 | CC: | | | | | |
| | Filed January 10, 2001 | | | | | | |
| | Our Ref.: 00/001 MFE | | | | | | |
| | Response to Office Action dated 5/18/05 | | | | | | |

Fax:7043654851

Dear Examiner Rickman

Attached are the documents as indicated above.

Respectfully submitted,

Claire Wygand

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Fax:7043654851

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PTO/SB/17 (10-03)
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|---|-----------------------------|---|--------------|-------------|-------------------------|---------------------|------------------------------------|------------------------|----------------|--|--|--|
| FEE TRANSMITTA | | Complete If Known | | | | | | | | | | |
| LEE IVANSIAILIA | - | Application Number | | or 09 | 757, | | | | | | | |
| for FY 2004 | | Filing Date | | | Jai | January 10, 2001 | | | | | | |
| Effective 10/01/2003, Patent fees are aubject to annual revision. | | First Named Inventor Murso | | | ursch | all | | | | | | |
| | | Examiner Name H. C. | | | C. R | lickman | | | | | | |
| Applicant claims small entity status. See 37 CFR 1.27 | - | Art Unit 1773 | | | 73 | | | | | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 120.00 | | Attorney Docket No. 00/00 | | | | /001 | MFE | | | | | |
| METHOD OF PAYMENT (check all that apply) | FEE CALCULATION (continued) | | | | | | | | | | | |
| Check Credit card Money Other None | 3. A | 3. ADDITIONAL FEES | | | | | | | | | | |
| Deposit Account: | Larne Entity : Small Entity | | | | | | | | | | | |
| Deposit Account 50-2193 | Fee Code | Fee (\$) | | Fee (\$) | | Fee C | Description | 1 | Fee Paid | | | |
| Number | 1051 | 130 | 2051 | | _ | | filing fee or o | | | | | |
| Deposit Account ProPat, LLC | 1052 | 50 | 2052 | | Surcharge cover she | | provisional fi | ling fee of | ├ ── | | | |
| Name The Director is authorized to: (check all that apply) | 1053 | | 1053 | | Non-Engl | • | ├── ┤┃ | | | | | |
| Charge fee(a) indicated below Credit any overpayments | 1 | 2,520 | 1812 2 | -, | _ | | • | te reexamination | | | | |
| Charge any additional fee(s) or any underpayment of fee(s) | 1804 | 920* | 1804 | 920" | Examiner Examiner | ection | leation of SIR | c pricei co | ├─ ─ ┤┃ | | | |
| Charge fee(s) Indicated below, except for the filling fee to the above-identified deposit account. | 1805 | 1,840* | 1805 | 1,840° | Requestir Examiner | ng pub r action | | | | | | |
| FEE CALCULATION | 1251 | 110 | 2251 | | | | ply within fire | | 120.00 | | | |
| 1. BASIC FILING FEE | 1252 | | 2252 | | | | ply within sec | | | | | |
| Large Entity Small Entity Fee Fee Fee Fee Fee Description Fee Paid | 1253 | | 2253 | | | | ply within thir | | | | | |
| Gode (3) Gode (8) | | 1,480 | 2254 | | | | ply within fou ply within fifti | | | | | |
| 1001 770 2001 385 Utility filing fee | 1401 | 2,010 330 | 2255 2401 | | | | · · | i monu | | | | |
| 1002 340 2002 170 Design filing fee 1003 530 2003 265 Plant filing fee | 1402 | | 2402 | | Notice of | | si support of en | appeal | | | | |
| 1004 770 2004 365 Release filing fee | 1403 | | 2403 | | Request | | | VPP VVI | | | | |
| 1005 160 2005 60 Provisional filing fee | 1451 | 1,610 | 1451 | 1,510 | Petition to | o institu | ite a public u | se proceeding | | | | |
| SUBTOTAL (1) (\$) | 1452 | 110 | 2452 | 55 | Petition to | o nevive | e - unevoldeb | ilo | <u> </u> | | | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | | 1,330 | 2453 | 686 | Petition to | יאועפיז ס | e - unintentio | nel | ├ ──┤│ | | | |
| Fee from Extra Claims below Fee Paid | | 1,330 480 | 2501 2502 | | Utility ise | | | | | | | |
| Total Claims X = | 1502 1503 | | 2502 | | Design is Plant issu | | u | | | | | |
| Independent - 3** = X | 1460 | | 1460 | | Petitions | | | | | | | |
| Multiple Department | 1807 | 50 | 1807 | 50 | Processi | ng fee | | | | | | |
| Large Entity Smell Entity Pee Pee Fee Pee Fee Description | 1808 | 180 | 1808 | | Submissk | | | | | | | |
| Code (\$) Code (\$) | 8021 | 40 | 8021 | 40 | Recording property (| g each (times | patent assign | nment per oparties) | [[] | | | |
| 1202 16 2202 9 Cleims in excess of 20 | 1809 | 770 | 2809 | 385 | Filing a se | ubmiss | sion after fina | | | | | |
| 1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid | 4044 | 770 | 2012 | | (37 ČFR | | | to be | | | | |
| 1203 250 2203 145 Multiple dependent claim, ir not paid 1204 88 2204 43 ** Reissue Independent claims | 1810 | 770 | 2810 | 202 | examined Loueston | d (37 C | mai invention (FR 1.129(b)) |) | | | | |
| over original patent | | 770 | 2801 | | | | | nination (RCE) | | | | |
| 1205 18 2205 9 ** Release claims in excess of 20 and over original patent | 1802 | 900 | 1802 | 900 | Request of a desig | t for ex Ign app | pedited exam lication | nination | | | | |
| 8UBTOTAL (2) (\$) | | Other fee (specify) | | | | | | | | | | |
| **or number previously paid, if greater, For Relasues, see above | *Red | aduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 120 | | | | | | | 00 | | | |
| 8UBMITTED BY (Complete (if applicable)) | | | | | | | | | | | | |
| Name (Print/Type) Cathy, R. Moore | | Registration No. 45,764 | | | | - 1 | Telephone 704 365-4881 | | | | | |
| Signature Coffy F. Mescit | | | | | | | Date Sept. 2, 2005 | | | | | |

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